FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

PROCESSED

FEB 1 0 2009

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form.....16

SEC USE ONLY						
Prefix Serial						
DATE RECEIVED						
	1					

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\downarrow	,					
Name of Offering (check if this is an am	endment and name has changed	l, and indicate change.)				.
Partners Capital Condor Fund IV, L.P. (the "Partnership")					·· ·
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	E Rule 506		Section 4(6)	☑ ULOE
Type of Filing:		New Filing		☐ Am	endment	
-	A. BASIC	CIDENTIFICATION	DATA		•	
. Enter the information requested about	the issuer					
Name of Issuer (☐ check if this is an amen	dment and name has changed, a	ınd indicate change.)		_	/ I	
Partners Capital Condor Fund IV, L.P.))
Address of Executive Offices	·	eet, City, State, Zip Coo				
c/o Partners Capital Investment Group,	L.L.C., 50 Rowes Wharf, 4th	Floor, Boston, MA 021	10 617-292-2570	0	TATAM TOWN TOWN TOWN TOWN	N KANTU NATI KRITICO BANKO (1901
Address of Principal Business Operations (I if different from Executive Offices)	Number and Street, City, State,	Zip Code)	Telephone Num	ber (Inc'	090	01911
Brief Description of Business	L2-		•	8	Elo .	
Venture capital investment limited partn	ersnip			M(((*))) * *	Joses III. I	
Type of Business Organization	69			Se	rioita	
☐ corporation	limited partnership, alrea	•	other:			
☐ business trust	☐ limited partnership, to be for	ormed		<u>lan</u>	<u>277000_</u>	
A I P. di d D. t d I	Oitio	Month 2	<u>Year</u> 2007			
Actual or Estimated Date of Incorporation of	or Organization.	•	2007	. 🖾 Actu	այդնու, ւ և 🗆	☐ Estimated
Jurisdiction of Incorporation or Organization	n: (Enter two-letter U.S. Po	stal Service abbreviation	n for State:	TOPOTO		
	CN for Canada; FN for o	other foreign jurisdiction	1)	DE	•	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Director EGeneral Partner of the ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Partnership (the "General Partner") Full Name (Last name first, if individual) Partners Capital Investment Group, L.L.C. Business or Residence Address (Number and Street, City, State, Zip Code) 50 Rowes Wharf, 4th Floor, Boston, MA 02110 Check Box(es) that Apply: ☐ Director ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Manager of the General Partner Full Name (Last name first, if individual) Miranda, Stan B. Business or Residence Address (Number and Street, City, State, Zip Code) 50 Rowes Wharf, 4th Floor, Boston, MA 02110 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Manager of the General Partner Full Name (Last name first, if individual) Collis, John Business or Residence Address (Number and Street, City, State, Zip Code) 50 Rowes Wharf, 4th Floor, Boston, MA 02110 Check Box(es) that Apply: ☐ Director ☐ Beneficial Owner ☐ Executive Officer Manager of the General ☐ Promoter Partner Full Name (Last name first, if individual) Fox, William Husiness or Residence Address (Number and Street, City, State, Zip Code) 50 Rowes Wharf, 4th Floor, Boston, MA 02110 Check Box(es) that Apply: ☐ Executive Officer ☐ Director Manager of the General ☐ Promoter ☐ Beneficial Owner Partner Full Name (Last name first, if individual) Dimitruk, Paul Business or Residence Address (Number and Street, City, State, Zip Code) 50 Rowes Wharf, 4th Floor, Boston, MA 02110 Check Box(es) that Apply: ☐ Other ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director Full Name (Last name first, if individual) Gadiesh, Orit Business or Residence Address (Number and Street, City, State, Zip Code) 274 Dudley St, Brookline MA 02445 Check Box(es) that Apply: Other ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director Full Name (Last name first, if individual) Leumi Overseas Trust Corporation Limited as trustee of The Tampere Trust Business or Residence Address (Number and Street, City, State, Zip Code) PO Box 510, Ground Floor, 27 Hill Street, St. Helier, JE 4 5TR, Jersey Check Box(es) that Apply: **☒** Beneficial Owner ☐ Executive Officer ☐ Director ☐ Other ☐ Promoter Full Name (Last name first, if individual) The WCR Family Limited Partnership Business or Residence Address (Number and Street, City, State, Zip Code) Wilica, INC, 601 Jefferson, #4000, Houston, TX 77002 Check Box(es) that Apply: ☐ Executive Officer ☐ Director ☐ Other □ Promoter ☐ Beneficial Owner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Executive Officer ☐ Director Other ☐ Promoter ☐ Beneficial Owner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING												
1	. Has the issu	uer sold, or do	es the issuer	intend to se		accredited inv lso in Appen					Y	'es No	_X_
2	What is the	e minimum inv	vestment that	will be acce	epted from	any individu	al?	*****************	*******************	***************************************		VA.	
3	Does the offering permit joint ownership of a single unit?												
4	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
F	Full Name (Last name first, if individual)												
E	Business or Residence Address (Number and Street, City, State, Zip Code)												
١	Name of Associ	ated Broker o	r Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All Sta	tes" or check	individual St	ates)	•••••								
Į	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
į	[L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
1	MTJ	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
7	RI]	[SC]	[SD]	[TN]	[TX]	[Ưፐ]	[VT]	[VA]	[VA]	[WV]	[WI]	(WY)	[PR]
	Full Name (Last name first, if individual)												
-	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer													
+	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
((Check "All States" or check individual States)												
ļ	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
į	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
- 1	[MT]	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
	[RI]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
ا	Full Name (Last name first, if individual)												
+	Business or Residence Address (Number and Street, City, State, Zip Code)												
	Name of Associated Broker or Dealer												
1	States in Which	Person Lister	d Has Solicit	ed or Intend	s to Solicit	Purchasers				<u> </u>		··· -	<u> </u>
	(Check "All Sta												All States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
- 1	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	(MS)	[MO]
- 1	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

Į.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the	e securities offered for ex	one" or "zero." If the change and already exchange Amount Already
	Type of Security	Aggregate Offering Price	Sold
1	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred	,	•
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$16,125,000.00	\$ <u>16,125,000.00</u>
	Other (Specify:)	\$	\$
	Total	\$16,125,000.00	\$ <u>16,125,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate
		Investors	Dollar Amount
			of Purchases
	Accredited Investors	16	\$ <u>16,125,000.00</u>
	Non-accredited Investors	0	\$0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of	Dollar Amount
		Security	Sold
	Type of Offering		
	Rule 505		\$
1	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	9	\$250.00
1	Legal Fees	9	\$1,000.00
	Accounting Fees	9	\$25,600.00
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (Specify)	g	\$1,250,00
	Total	9	\$28,100.00

C. OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSES AND USE	OF PROCEEDS	
 Enter the difference between the aggregate offering price given i furnished in response to Part C – Question 4.a. This difference i 			\$16,096,900.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer us If the amount for any purpose is not known, furnish an estimate and chec payments listed must equal the adjusted gross proceeds to the issuer set f	k the box to the left of the estimate. The	ne total of the	
		syment to Officers,	Payment To
		rectors, & Affiliates	Others
\$alaries and fees		5	□ \$
Purchase of real estate		5	<u> </u>
Purchase, rental or leasing and installation of machinery and equipment		S	□ s
Construction or leasing of plant buildings and facilities		<u> </u>	□ \$
Acquisition of other businesses (including the value of securities involved in the exchange for the assets or securities of another issuer pursuant to a merger)	his offering that may be used	5 _	□ \$
Repayment of indebtedness		<u> </u>	□ \$
Working capital (a portion of the working capital will be used to pay vari		S	≥ \$16,096,900.00
the life of the Partnership, payable to Partners Capital Investment Group sole General Partner of Partners Capital Condor Fund IV, L.P.)	o, L.L.C., which serves as the		
Other (specify):	4 1 0	5	
	···	S	□ \$
Column Totals		5	
Total Payments Listed (column totals added)		<u>⊠\$16,096,90</u>	
D FFD	DERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly at an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conpn-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date
Partners Capital Condor Fund IV, L.P.	Mart	7	12/22/08
		~	
Name of Signer (Print or Type)	Title of Signer (Print or Type) A Manager of Partners Capital Inv	contract Cooper I I I	C which coming as the sole
William Fox	general partner of Partners Capital inv		
	TTENTION		
Intentional misstatements or omissions of fact constitute feder	al criminal violations. (See 181	U.S.C. 1001.)	

_	E. STA	TE SIGNATURE		,			
1.	Is any party described in 17 CFR 230.262 presently subject to any of t	he disqualification provisions of such rule?	Yes	No ⊠			
	See Appendix, Column 5, for state response.						
2.	2. The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (17 CFR 23 times as required by state law.						
3.	3. The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to offere						
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that thes conditions have been satisfied.						
Th	issuer has read this notification and knows the contents to be true and h	as duly caused this notice to be signed on its behalf by the undersigned	duly authoriz	ed			
pe	son.						
Iss	uer (Print or Type)	Signature Da	te - Na				
Pa	rtners Capital Condor Fund IV, L.P.	man 12	72/06	_			
Nε	me (Print or Type)	Title (Print or Type)					
William Fox		A Manager of Partners Capital Investment Group, L.L.C., which serves as the sole general partner of Partners Capital Condor Fund IV, L.P.					



Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.